Case 1:22-cv-05277-PAE Document 46 Filed 01/27/22 Page 1 of 6

Name and address:

John B. Buda, Bar No. 2651259 1201 W. Huntington Drive, Suite 209 Arcadia, California 91077

		DISTRICT COURT CT OF CALIFORNIA
Atlantic Specialty Insurance Company, et al. V.	Plaintiff(s),	CASE NUMBER 2: 21-cv-08974-SB-SK
Apex Logistics International Inc., et al.	Defendant(s),	APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE PRO HAC VICE

INSTRUCTIONS FOR APPLICANTS

- (1) The attorney seeking to appear pro hac vice must complete Section I of this Application, personally sign, in ink, the certification in Section II, and have the designated Local Counsel sign in Section III. ELECTRONIC SIGNATURES ARE NOT ACCEPTED. Space to supplement responses is provided in Section IV. The applicant must also attach a Certificate of Good Standing (issued within the last 30 days) from every state bar to which he or she is admitted; failure to do so will be grounds for denying the Application. Scan the completed Application with its original ink signature, together with any attachment(s), to a single Portable Document Format (PDF) file.
- (2) Have the designated Local Counsel file the Application electronically using the Court's electronic filing system ("Motions and Related Filings => Applications/Ex Parte Applications/Motions/Petitions/Requests => Appear Pro Hac Vice (G-64)"), attach a Proposed Order (using Form G-64 ORDER, available from the Court's website), and pay the required \$500 fee online at the time of filing (using a credit card). The fee is required for each case in which the applicant files an Application. Failure to pay the fee at the time of filing will be grounds for denying the Application. Out-of-state federal government attorneys are not required to pay the \$500 fee. (Certain attorneys for the United States are also exempt from the requirement of applying for pro hac vice status. See L.R. 83-2.1.4.) A copy of the G-64 ORDER in Word or WordPerfect format must be emailed to the generic chambers email address. L.R. 5-4.4.2.

SECTION I - INFORMATION

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		(212) 235-7022
Telephoi	ne Number	Fax Number
Owen@ODuffy-Law.com		
E-mail Address		
🗷 Plair	itiff(s) 🔲 Defend	ant(s)
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	<i>"</i> ··· _ ,	
hich the appl	icant has been adn	nitted, and provide the current status of his o
provide addit	tional information	•
provide addi: <u>Admission</u>		r in Good Standing? (if not, please explain)
	Telephon Telephon Plain Plain which the appl	(516) 721-8793 Telephone Number Ower Plaintiff(s) Defendent Plaintiff(s) Defendent Which the applicant has been adm

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List all cases in which the applicant h needed):	as applied to this Court for pro hac vice status in	n the previous three years (cont	inue in Section IV if
<u>Case Number</u>	<u>Title of Action</u>	Date of Application	Granted / Denied?
		-	
Y 44, **			
If any pro hac vice applications submi	itted within the past three (3) years have been d	enied by the Court, please expl	ain:
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11.5			
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I g			
I declare under penalty			
(1) All of the above inf	formation is true and correct.		
(2) I am not a resident	of the State of California. I am not regu		aged in
	s, professional, or other activities in the suspended from and have never been di		any court.
(4) I am familiar with t	the Court's Local Civil and Criminal Ru		
	e, and the Federal Rules of Evidence. rney listed in Section III below, who is a	member in good standin	g of the Bar
of this Court and m	naintains an office in the Central Distric is physically present on a regular basis t	t of California for the prac	ctice of law, in
Dated January 27, 2022	Owen F. Duffy		
	Applicant's Nam	e (please type or print)	
	Applicant's Signa	Ture	

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Buda, John B.					
Designee's Name (Last Name, First Name & Middle	e Initial)				
ohn Buda Law Offices	-				
irm/Agency Name					
201 West Huntington Drive, Suite 209	626-714-7492	844-804-6756			
201 West Huntington Drive, Suite 209	Telephone Number	Fax Number			
treet Address	 John.buda@budalawgrou				
		Email Address 261259 Designee's California State Bar Number			
Arcadia, California 9/077 City, State, Zip Code	261259				
nereby consent to the foregoing designation as le entral District of California for the practice of la Dated January 27, 2022	ocal counsel, and declare under penalty of p aw, in which I am physically present on a re John B. Buda	perjury that I maintain an office in the gular basis to conduct business.			
	Designee's Name (please type	e or print)			
	May 12 10 10				
	Designee's Signature hy O	A			
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,			
ECTION IV - SUPPLEMENT ANSWERS HERE	(ATTACH ADDITIONAL PAGES IF NEC	EESSARY)			

ATTACHMENT TO APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE PRO HAC VICE

With respect to the requirement set forth in L.R. 83-.1.3.1 (a), Owen F. Duffy has a requested a Certificate of Good Standing from the Appellate Division of the Second Department for the Courts of the State of New York as per the attached email.

The actual Certificate of Good Standing will be presented when it is received.

In the meantime, the Court is requested to see the attached Receipt for Owen F. Duffy's recent attorney registration which was accomplished on December 15, 2001.

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Thursday, January 27, 2022 at 14:16:21 Eastern Standard Time

Subject: Certificate of Good Standing Request

Date: Thursday, January 27, 2022 at 14:15:13 Eastern Standard Time

From: Appellate Division

To: owen@oduffy-law.com

Dear Owen Duffy,

Your submission has been accepted and is in review.

If you did not submit this request, or have any questions regarding this request, please contact the Appellate Division, Second Department, ad2-clerksoffice@nycourts.gov.

Thank you, Supreme Court, Appellate Division

OFFICE OF COURT ADMINISTRATION ATTORNEY REGISTRATION UNIT

December 15, 2021

OWEN F. DUFFY PO BOX 919 **POINT LOOKOUT, NY 11569-0919** RECEIPT

Attorney Registration #: 2302156

Batch #: Online

Process Date: 12/15/2021

Receipt #: 915865

Credit Card Ending In: 4004 Registration Fee Transaction #:

151221EC0-FF56C0F3-56C5-48CA-9803-0B3D5468CC01

Authorization Code: 282305

Non-Refundable Service Fee: \$11.21

Service Fee Transaction #:

151221EC0-BBEBF282-CBBD-491B-81D4-DB3E7A968C58

Service Fee Auth. Code: 249641 Next Registration: Jan 2024

Registration Status: Currently registered

This will acknowledge receipt of your 2022-2023 registration as an attorney and receipt of the \$375 fee.

Name: OWEN F. DUFFY

First:

OWEN

Middle: F.

DUFFY Last:

Suffix:

Admission Data:

Year Admitted

1990

Judicial Dept. of Admission:

2

Business Address:

PO Box 919

Point Lookout, NY 11569-0919

DOB: XX/XX/1954

SSN: XXX-XX-3144

AN EXPLANATION OF WHY SOCIAL SECURITY NUMBERS ARE REQUIRED AS PART OF THIS APPLICATION MAY BE FOUND AT:

http://ww2.nycourts.gov/attorneys/registration/index.shtml

Law School: FORDHAM

Law Offices of Owen F. Duffy

Home Address: (Note: Is public information ONLY if no business is provided.)

PO BOX 919

POINT LOOKOUT, NY 11569-0919

Business County:

Nassau

Home County:

Nassau

Business Phone:

(516) 721-8793

e-mail (optional):

OWEN@ODUFFY-LAW.COM

Note: If provided, the e-mail address will be made public.

Our records contain information above, return only if changes to the above are required and retain a copy for your records.

Please review the above information on this receipt for accuracy. The Rules of the Chief Administrator require that this office be notified of any changes in the above information within 30 days of any such change. If changes are required you may make them online.

Online 1) Go to www.nycourts.gov and Attorney Online Services 2) Make desired changes 3) Print a corrected receipt.

- OR -

By Mail 1) Circle the item 2) Enter the correct information directly on the receipt 3) Sign and date the receipt 4) Return to the address at the bottom of the receipt.

Signature: _

Date:

Part 1200 (1.15) Affirmation: Yes

Child Support Oblig. §3-503: No obligation

CLE: Hours Completed: 25.5

Pro Bono Reported: Yes